| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Application No.                                                                                       | Applicant(s)                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Notice of Allowability                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 10/628,458                                                                                            | LEE, CHANG-ROK                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Examiner                                                                                              | Art Unit                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Joshua A. Lohn                                                                                        | 2114                                                                          |
| The MAILING DATE of this communication appeal All claims being allowable, PROSECUTION ON THE MERITS IS herewith (or previously mailed), a Notice of Allowance (PTOL-85) NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RI of the Office or upon petition by the applicant. See 37 CFR 1.313                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (OR REMAINS) CLOSED in<br>or other appropriate commu<br>GHTS. This application is s                   | this application. If not included nication will be mailed in due course. THIS |
| 1. This communication is responsive to <u>IDS filed 6/8/05</u> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                       |                                                                               |
| 2. X The allowed claim(s) is/are <u>1-20</u> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                       | •                                                                             |
| <ol> <li>Acknowledgment is made of a claim for foreign priority unapplication.</li> <li>All b) Some* c) None of the:         <ol> <li>Certified copies of the priority documents have</li> <li>Certified copies of the priority documents have</li> <li>Copies of the certified copies of the priority documents have</li> <li>Moreover and the priority documents have</li> <li>Copies of the certified copies of the priority documents have</li> <li>Copies of the certified copies of the priority documents have</li> <li>Moreover and the priority documents have</li> <li>Certified copies of the priority documents have</li> <li>The priority documents have</li> <li>Moreover and the priority documents have</li></ol></li></ol> | been received.  been received in Application cuments have been received of this communication to file | n No  In this national stage application from the                             |
| 4. A SUBSTITUTE OATH OR DECLARATION must be submit INFORMAL PATENT APPLICATION (PTO-152) which give                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                       |                                                                               |
| <ol> <li>CORRECTED DRAWINGS (as "replacement sheets") muse (a)  including changes required by the Notice of Draftspers         <ul> <li>(a)  hereto or 2)  to Paper No./Mail Date</li> <li>(b)  including changes required by the attached Examiner's Paper No./Mail Date</li> </ul> </li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | on's Patent Drawing Review                                                                            |                                                                               |
| Identifying indicia such as the application number (see 37 CFR 13 each sheet. Replacement sheet(s) should be labeled as such in the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                       | _ ,                                                                           |
| 6. DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | sit of BIOLOGICAL MATE                                                                                | RIAL must be submitted. Note the                                              |
| Attachment(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | E                                                                                                     | armal Datant Application (DTO 452)                                            |
| <ol> <li>Notice of References Cited (PTO-892)</li> <li>Dotice of Draftperson's Patent Drawing Review (PTO-948)</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <u>—</u>                                                                                              | ormal Patent Application (PTO-152) mmary (PTO-413),                           |
| 3. ⊠ Information Disclosure Statements (PTO-1449 or PTO/SB/0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Paper No./                                                                                            | Mail Date Amendment/Comment                                                   |
| Paper No./Mail Date 6/8/05  4. Examiner's Comment Regarding Requirement for Deposit of Biological Material                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <u></u>                                                                                               |                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | _                                                                                                     | Statement of Reasons for Allowance                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 9.                                                                                                    |                                                                               |
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## **REASONS FOR ALLOWANCE**

The following is an examiner's statement of reasons for allowance: Claims 1-20 are allowable for including the limitations, when taken within the context of the claims as a whole, of "detecting and deleting error data when the reproducing and recording is stopped" and "stopping reproducing and recording in response to the power-off command".

Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled "Comments on Statement of Reasons for Allowance."

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Joshua A. Lohn whose telephone number is (571) 272-3661. The examiner can normally be reached on M-F 8-4.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Scott Baderman can be reached on (571) 272-3644. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

JAL

SCOTT BADERMAN
SUPERVISORY PATENT EXAMINER